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Fill in this information to identify your cas	se:
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

JAN 30 2018

JEFFREY P. ALLSTEADT, CLERK
INTAKER This is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Dobton 2 (O
1.	Your full name		About Debtor 2 (Spouse Only in a Joint Case):
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Chaquita	
		First name	First name
	passport).	Middle name	Middle name
	Bring your picture	Harris	make hento
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. A	All other names you	$\frac{1}{2}$	
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
rhishigo			Notice extended to the control of the Note that are to the or the thick of the profession and the control of the procession at the control of
- }	**************************************	xxx - xx - <u>6 1 7 3</u>	xxx - xx
	ndividual Taxpayer	OR	OR
ŀ	dentification number	9 xx - xx	9 xx - xx

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_{Debtor 1} Chaquita Ha		Casa number at
First Name Middle	Name Last Name	Case number (if known)
	About Debtor 1;	About Debtor 2 (Spouse Only in a Joint Case):
A see a besself		, , , , , , , , , , , , , , , , , , ,
Any business names and Employer Identification Numbers	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
(EIN) you have used in	Harris Healthcare	
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	4 6_4 5 7 7 6 3 6	
	4 6 4 5 7 7 6 3 6 EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
÷	144 Washington Ave	
	Number Street	Number Street
	La Grange IL 6052	25
	City State ZIP Co	
	Cook County	
	•	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Cod	e City State ZIP Code
Why you are choosing	Check one:	о — Сомонительностью постой достинент общення в постоя пост
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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D	Debtor 1 Chaquita Har	ris ame	Last Na	me		Case number (/	f known)
	Western 19						
	art 2: Tell the Court Abo	ut Your	Bankrı	iptcy Case	····		
7.	. The chapter of the Bankruptcy Code you	Check for Bar	one. (Fo	or a brief description of ea (Form 2010)). Also, go to	ch, see No	tice Required by 1	1 U.S.C. § 342(b) for Individuals Filing
	are choosing to file under	_	apter 7	, , , , ,			are appropriate box.
	under	☐ Chi	apter 1	1			
		☐ Cha	apter 1:	2			
		🗹 Cha	apter 13	3			
8.	How you will pay the fee	you sub	rself, yomitting	for more details about ou may pay with cash,	how you r cashier's	nay pay. Typica check, or mone\	neck with the clerk's office in your lly, if you are paying the fee order. If your attorney is pay with a credit card or check
		☑ I ne App	ed to p	ay the fee in installm for Individuals to Pay	ents. If yo The Filing	ou choose this o	otion, sign and attach the ents (Official Form 103A).
		less pay	aw, a ju than 1 the fee	idge may, but is not re 50% of the official povi	quired to, erty line th I choose th	waive your fee, at applies to you his option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.
9.	Have you filed for	☐ No					
	bankruptcy within the last 8 years?	🗹 Yes.	District	Northern-Illinois	When	02/20/2015 MM / DD / YYYY	Case number 1505795
			District		When		Case number
			District			MM / DD / YYYY	
			District		When	MM / DD / YYYY	Case number
10.	Are any bankruptcy cases pending or being	☑ No					
	filed by a spouse who is	Yes.	Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?						Case number, if known
			Debtor	****			Relationship to you
							Case number, if known
	Do you rent your residence?	No. Va Yes.	☑ No.	ur landlord obtained an ev Go to line 12.	About an E	ment against you?	-

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Debtor 1 Chaquita Ha		Last Name		Case number (if kno	own)
Part 3: Report About Any	Proince	Vou O	nia Burania (n. 1		
		ses You Own as a S	ole Proprietor		
Are you a sole proprietor of any full- or part-time		. Go to Part 4.			
business?	☑ Ye	s. Name and location of b	usiness		
A sole proprietorship is a business you operate as an		Harris Healthcare			
individual, and is not a separate legal entity such as		Name of business, if any			
a corporation, partnership, or LLC.		144 Washington A	ve		
If you have more than one					
sole proprietorship, use a separate sheet and attach it		La Grange		IL	60525
to this petition.		City		State	ZIP Code
		Check the appropriate i	box to describe vour	husiness:	
		☐ Health Care Busine			
		☐ Single Asset Real E			8))
		☐ Stockbroker (as def			<i>''</i>
		Commodity Broker			
		☐ None of the above			
3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see	most reany of t	appropriate deadlines. If cent balance sheet, state hese documents do not e I am not filing under Cha	you indicate that you ment of operations, exist, follow the processphere 11.	u are a small busines cash-flow statement, edure in 11 U.S.C. §	s small business debtor so that it it is debtor, you must attach your, and federal income tax return or if 1116(1)(B).
11 U.S.C. § 101(51D).		I am filing under Chapte			cording to the definition in the
art 4: Report if You Own	or Have	Bankruptcy Code. Any Hazardous Prop	erty or Any Prop	erty That Needs	Immediate Attention
Do you own or have any					
property that poses or is	☑ No				
alleged to pose a threat of imminent and identifiable hazard to public health or safety?	□ Yes.	What is the hazard?			
Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock		If immediate attention is	s needed, why is it n	eeded?	
that must be fed, or a building that needs urgent repairs?		Where is the property?			
		oro to the property:	Number Stree	et	
			City		State ZIP Code

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Debtor	1	

Chag	uita	Harris	
First Name	N/	liddle Name	Ī

ast Name

_			
Case	number (if know	ent.	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

√ received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

am not required to receive a briefing about
credit counseling because of:

Disability.

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after i

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I
filed this bankruptcy petition, and I received a
certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	btor 1 Chaquita Har	TriS	Ca	se number (if known)			
Pa	art 6: Answer These Que	estions for Reporting Purpos	ses				
16.	What kind of debts do you have?	16a. Are your debts prima as "incurred by an individu	rily consumer debts? Could primarily for a personal, for	onsumer debts are amily, or househok	e defined in 11 U.S.C. § 101(8) d purpose."		
		☐ No. Go to line 16b. ☑ Yes. Go to line 17.					
		16b. Are your debts primar money for a business or in	rily business debts? Businessment or through the open	s <i>iness debts</i> are de eration of the busin	ebts that you incurred to obtain ness or investment.		
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.					
		16c. State the type of debts you	u owe that are not consumer	debts or business	debts.		
	Are you filing under Chapter 7?	No. I am not filing under Ch	napter 7. Go to line 18.	оченивания из общинательна удобация.	en e	depe	
	Do you estimate that after any exempt property is excluded and	Yes. I am filing under Chapte administrative expense	er 7. Do you estimate that a s are paid that funds will be	fter any exempt pro available to distrib	operty is excluded and oute to unsecured creditors?		
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?						
	How many creditors do you estimate that you	☑ 1-49 □ 50-99	1,000-5,000		25,001-50,000	and state of the	
	owe?	☐ 100-199 ☐ 200-999	5,001-10,000 10,001-25,000		☐ 50,001-100,000 ☐ More than 100,000		
	How much do you estimate your assets to	☑ \$0-\$50,000 □ \$50,001-\$100,000	\$1,000,001-\$10 mil		\$500,000,001-\$1 billion		
	be worth?	□ \$100,001-\$500,000 □ \$500,001-\$1 million	\$50,000,001-\$50 m	million (☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion		
	How much do you estimate your liabilities	☑ \$0-\$50,000	□ \$1,000,001-\$10 mill	ion [■ \$500,000,001-\$1 billion	non Komillia	
	to be?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 m \$50,000,001-\$100 r	nillion [\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion		
Par	t 7: Sign Below	□ \$500,001-\$1 million	\$100,000,001-\$500	million L	More than \$50 billion		
-or	you	I have examined this petition, and correct.	d I declare under penalty of	perjury that the info	ormation provided is true and		
		If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I ma understand the relief availab	y proceed, if eligib le under each cha	ole, under Chapter 7, 11,12, or 13 pter, and I choose to proceed		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with					
		I understand making a false state with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519, ar	t in tines up to \$250,000, or	or obtaining money imprisonment for u	y or property by fraud in connection up to 20 years, or both.		
		Signature of Debtor 1	Main:	Signature of Date	14-0		
		·		Signature of Det	otor 2		
	State State of the control of the co	Executed on MM / DD /YI	YYY	Executed on	M / DD /YYYY		

		Document Page 7 of 53
Debtor 1	Chaquita Hari	Case Humber (if known)
For you bankrup attorney	if you are filing this tcy without an	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.
an attorn	e represented by ley, you do not ile this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.
		You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.
		If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.
		Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? No Yes
		Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Yes
		Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms ✓ No ☐ Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
		By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.
		Signature of Debtor 2 Signature of Debtor 2

Date

Contact phone

Email address

Cell phone

MM/DD /YYYY

Date

Contact phone

Cell phone

Email address

MM / DD / YYYY

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	Ob	• 1824/09 (80,000)	The Administration of the Samuel Comments	
Debtor 1	Chaquita Har	ris		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States (Bankruptcy Court fo	r the: Northern District of (llinois	
Case number				
	(if known)			

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$5,000.00
1c. Copy line 63, Total of all property on Schedule A/B	\$5,000.00
Part 2: Summarize Your Liabilities	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,000.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,805.00

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De	ebtor 1	Chaquita Harris First Name Middle Name	Last Name	Case number (if known)	And design of the Control of the Con	- i - v to vita illa decembra
P	art 4:	Answer These Questions for	r Administrative and Statistical R	Records		
6.	Are you	filing for bankruptcy under Cha	pters 7, 11, or 13?			
	No. No. Yes	You have nothing to report on this	part of the form. Check this box and sub	omit this form to the court with your o	ther schedules.	
7.	What ki	nd of debt do you have?				
	☑ You fami	r debts are primarily consumer o y, or household purpose." 11 U.S.	debts. Consumer debts are those "incurr C, § 101(8). Fill out lines 8-9g for statistic	red by an individual primarily for a pe cal purposes. 28 U.S.C. § 159.	ersonal,	
	You this:	r debts are not primarily consum form to the court with your other so	ner debts. You have nothing to report on the check the c	n this part of the form. Check this box	x and submit	
8.	From th Form 12	e Statement of Your Current Mo. 2A-1 Line 11; OR, Form 122B Line	nthly Income: Copy your total current me 11; OR , Form 122C-1 Line 14.	nonthly income from Official	\$	3,000.00
					L	İ

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this information to identify your case and t	his filing:		
Debtor 1 Chaquita Harris			
First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District	of Illinois		
Case number			
		Į	Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Proper	tv		4045
	ns. List an asset only once. If an asset fits in more		12/15
Part 1: Describe Each Residence, Building	ı, Land, or Other Real Estate You Own or Ha	ve an interest in	any additional pages,
1. Do you own or have any legal or equitable inter	est in any residence, building, land, or similar prop	perty?	
✓ No. Go to Part 2.☐ Yes. Where is the property?			
Too. Where is the property?	What is the property? Check all that apply.	Da aastalada staara ah d	
1.1.	☐ Single-family home	Do not deduct secured of the amount of any secure	ed claims on Schedule D:
Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Creditors Who Have Clair	ms Secured by Property.
	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	- 🗖 Land	\$	\$
	Investment property	Deposition (Inc.)	
City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee	simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.
	Debtor 1 only		
County	Debtor 2 only	,	
	Debtor 1 and Debtor 2 only	Check if this is co (see instructions)	mmunity property
	At least one of the debtors and another	· ·	
	Other information you wish to add about this it property identification number:	em, such as local	
If you own or have more than one, list here:			
	What is the property? Check all that apply. Single-family home	Do not deduct secured cla	ims or exemptions. Put
1.2. Street address, if available, or other description	Duplex or multi-unit building	the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
Street address, if available, or other description	☐ Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	☐ Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature o	f your ownership
State ZIP Code	☐ Other	interest (such as fee s the entireties, or a life	simple, tenancy by estate), if known
	Who has an interest in the property? Check one.	, , , , ,	
	Debtor 1 only		
County	Debtor 2 only	<u></u>	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is cor (see instructions)	mmunity property
		,	
	Other information you wish to add about this iter property identification number:	n, such as local	

Chaquita Harris Debtor 1 Case number (if know Last Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 1.3 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the portion you own? entire property? Manufactured or mobile home Land Investment property City ☐ Timeshare Describe the nature of your ownership State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes Volvo Who has an interest in the property? Check one. 3.1 Make: Do not deduct secured claims or exemptions. Put s80 2.9 Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2001 Year: Current value of the Debtor 1 and Debtor 2 only Current value of the 160,000 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 1,500.00 1.500.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Make: 3.2 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

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Chaquita Harris Debtor 1 Case number (if known) Last Name Who has an interest in the property? Check one Make: 3.3 Do not deduct secured claims or exemptions, Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No Yes Who has an interest in the property? Check one. Make: 41 Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Other information: Current value of the At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put

		Check if this is community property (see instructions)	\$ \$
5.	Add the dollar value of the portion you owr you have attached for Part 2. Write that nur	i for all of your entries from Part 2, including any entrie	 \$1,500.00

At least one of the debtors and another

Model:

Year:

Other information:

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

Current value of the

portion you own?

the amount of any secured claims on Schedule D:

Creditors Who Have Claims Secured by Property.

Current value of the

entire property?

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Debtor 1

Chaquita Harris First Name

Middle Name Last Name Case number (if known)_

Part 3: **Describe Your Personal and Household Items**

D	o you own or have any legal or equitable interest in any of the following items?	portion y	uct secured claims
6.	Household goods and furnishings	Actinput	
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	☑ Yes. Describe Bedroom sets, living room furniture		4 500 00
	bodicom sets, fiving room fulfillare	\$	1,500.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	Yes. Describe TVs, Laptop	\$	1,000.00
R	Collectibles of value		
٠.	· · · · · · · · · · · · · · · · · · ·		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	☑ No	*******	
	Yes. Describe	\$	
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes		
	and kayaks; carpentry tools; musical instruments		
	No		
	Yes. Describe		
		\$	
10.	Firearms		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	☑ No		
	Yes. Describe	\$	
	N. 44	Ψ	
	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No		
	☑ No ☑ Yes Describe clothes, shoes	* ** Y	#00 00
	ciotiles, situes	\$	500.00
12 .	lewelry		
	•		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	□ No		
			100.00
	☑ Yes. Describe	\$	100.00
i	Examples: Dogs, cats, birds, horses		
	Z No		
(→ Yes. Describe	\$	
, ,	Ny other personal and have held the second s		
	ny other personal and household items you did not already list, including any health aids you did not list		
	Z No		
Ļ	res. Give specific	_	
	information	\$	
5. 🖊	add the dollar value of all of your entries from Part 3, including any entries for pages you have attached		0.400.00
f	or Part 3. Write that number here	\$	3,100.00

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Debtor 1

Chaquita Harris First Name

Middle Name

Last Name

Case number (if known)__

Do you own or have an	y legal or equitable interest in	any of the following?			portion y	value of the you own? duct secured claim
16. Cash <i>Examples:</i> Money you	ı have in your wallet, in your ho	ne, in a safe deposit box, and on hand when	you file your ;	petition		
☐ No						
2 Yes			Cash:		\$	0.00
17. Deposits of money Examples: Checking, and other s	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unultiple accounts with the same institution, list	nions, brokera each.	age houses,		
2 Yes		Institution name:				
	17.1. Checking account:	Citibank			\$	400.00
	17.2. Checking account:			·	\$	
	17.3. Savings account:				\$	
	17.4. Savings account:				_	
	17.5. Certificates of deposit:					·····
	17.6. Other financial account:					
	17.7. Other financial account:					
	17.8. Other financial account:					
	17.9. Other financial account:					
			· · · · · · · · · · · · · · · · · · ·		\$	
8. Bonds, mutual funds, Examples: Bond funds,	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts				
					\$	
					\$	White-/a
9. Non-publicly traded st an LLC, partnership, a	tock and interests in incorpor and joint venture	ated and unincorporated businesses, incl	uding an inte	erest in		
✓ No✓ Yes. Give specific	Name of entity:		% of owne			
information about them	***************************************		0%	% %	\$	
				70	e-	

0%

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Debtor 1	Chaquita I		Document	Case number	€f (if known)	
	First Name	Middle Name	Last Name	outo numbe	- C. MANNA	
			er negotiable and non-neg			
Negotiabl Non-nego	e instruments tiable instrum	include personal che ents are those you ca	cks, cashiers' checks, promis innot transfer to someone by	sory notes, and money orde signing or delivering them.	ers.	
☑ No						
	live specific	Issuer name:				
	ation about					\$
			444			\$
		***************************************				\$
21. Retirement			01(k), 403(b), thrift savings a		.	
Ø No	MICOCOLO 111 1	rkn, Errion, Reogn, 40	or(k), 405(b), trait savings a	occounts, or other pension or	r profit-sharing plans	
🔲 Yes. Li						
accour	nt separately.	Type of account:	Institution name:			
		401(k) or similar plan:			······································	\$
		Pension plan:	***************************************			\$
		IRA:	***************************************			\$
		Retirement account:	***************************************		44	\$
		Keogh:				\$
		Additional account:				\$
		Additional account:				\$
22. Security de						
Your share Examples: companies.	Agreements \	deposits you have many with landlords, prepaid	ade so that you may continue d rent, public utilities (electric,	e service or use from a comp gas, water), telecommunica	pany ations	
☑ No						
☐ Yes	***************************************	Inst	titution name or individual:			
		Electric:				
		Gas:				\$
		Heating oil:			***	\$
		Security deposit on rent	al unit:			\$
		Prepaid rent:				\$
		Telephone:				\$
		Water:				5
		Rented furniture:				\$
		Other:	***************************************	- Walter - Walter		5
	A contract for	a periodic payment of	money to you, either for life	or for a number of years)		
☑ No						
☐ Yes	***************************************	Issuer name and descr	ription:			

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Debtor 1

	0_000		02,00,20		
o			Document	Page 16 of 53	
Chaquita	Harris			Case number (if known)	
First Name	Middle Name	Last Nar	ne	O GOO THEIT OF STREET	

24 Interests in an education ID	A in an ac	count in a qualified ADI E assessment and a life of the life of th		
26 U.S.C. §§ 530(b)(1), 529A	(b), and 52	count in a qualified ABLE program, or under a qualified state tuit 9(b)(1).	ion program.	
☑ No	. ,.			
☐ Yes	Institution	n name and description. Separately file the records of any interests.11	USC 8521(c	٠,٠
		, ,	0.0.0.3 02:10	
	~~~			\$
				\$
				\$
25. Trusts, equitable or future in exercisable for your benefit	iterests in	property (other than anything listed in line 1), and rights or power	ers	
🗹 No				
Yes. Give specific information about them			rate no moments of a Physical program was a green.	\$
OC Potento assurbite to de-			*** ** *** * * * * ****** * * * * * *	
Examples: Internet domain na	arks, trade mes, websi	secrets, and other intellectual property ites, proceeds from royalties and licensing agreements		
No			.,	**
Yes. Give specific information about them				\$
27. Licenses, franchises, and ot	her genera	al intangibles		
No	cousive lice	enses, cooperative association holdings, liquor licenses, professional l	icenses	
	eminento de longo contra			•
Yes. Give specific information about them				\$
Money or property owed to you'			to charteffer to at region money in a green	j
, , , , , , ,				Current value of the portion you own? Do not deduct secured claims or exemptions.
8. Tax refunds owed to you				country of exemptions.
☑ No				
Yes. Give specific informati	on	The second secon		
about them, including	whether	Federa	ıl: \$	
you already filed the re and the tax years		State:	\$	
and the tax years.		Local:	\$.	
9. Family support				
	m alimony	spousal support, child support, maintenance, divorce settlement, proj		
No	iii allimony,	spousar support, critic support, maintenance, divorce settlement, proj	perty settlement	i
Yes. Give specific information	on	The state of the s		
- 700. Give appendic miorifiation	<b>он</b> ,	Alimony	:	\$
		Mainten		\$
		Support		\$ \$
			settlement;	\$ \$
			settlement:	\$
O. Other amounts someone owe	e ven	Ргорепу		· · · · · · · · · · · · · · · · · · ·
Examples: Unpaid wages, disat	pility insural	nce payments, disability benefits, sick pay, vacation pay, workers' cor I loans you made to someone else	npensation,	
☑ No				
Yes. Give specific information	on	ante 1913, como escreta se cara de caracter como a tramación de la secución de característico de la como de car	3	
				\$
		the transfer of the second of		

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Chaquita Ha	rris			
First Name A	Aiddle Name	Lest Nama	Case number (if known)	

3	☑ No	ce; health savings account (HSA); credit, homeowner	r's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name: Ber	neficiary:	Surrender or refund value:
				\$
				\$
			- The second	\$
3.	<ol> <li>Any interest in property that is due you if you are the beneficiary of a living trust, exproperty because someone has died.</li> <li>No</li> </ol>	rom someone who has died pect proceeds from a life insurance policy, or are cur	rrently entitled to receive	
	☐ Yes. Give specific information			
				\$
33	Examples: Accidents, employment disputes  7 No.	not you have filed a lawsuit or made a demand for , insurance claims, or rights to sue	r payment	<i>an</i>
	☐ Yes. Describe each claim			
				\$
34	to set off claims	of every nature, including counterclaims of the c	debtor and rights	
	☑ No			not n j
	Yes. Describe each claim.			<b>s</b>
			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	, <del>*********************************</del>
3.5	Any financial assets you did not already i	ins		
0.	No No	151		
	Yes. Give specific information			
				\$
36	Add the dollar value of all of your entries for Part 4. Write that number here	from Part 4, including any entries for pages you b	have attached	\$ 400.00
Pa	ort 5: Describe Any Business-Ro	elated Property You Own or Have an Ir	nterest In. List any re	eal estate in Part 1.
37		interest in any business-related property?		
	No. Go to Part 6.	. incerest in any business-related property?		
	Yes. Go to line 38.			
				Current value of the
				portion you own?  Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you	already earned		
	☑ No	-		
	Yes. Describe			
			· · · · · · · · · · · · · · · · · · ·	\$
39.	Office equipment, furnishings, and suppli			
	No	nodems, printers, copiers, fax machines, rugs, telephones, di	esks, chairs, electronic devices	
	☐ Yes. Describe		\$	
				\$

Case 18-02535 Doc 1 Filed 01/30/18 Entered 01/30/18 12:31:36 Desc Main Document Page 18 of 53 Chaquita Harris Debtor 1 Case number (if known) Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade M No Yes. Describe..... 41. Inventory ☑ No Yes. Describe...... 42 Interests in partnerships or joint ventures **∡** No Yes. Describe...... Name of entity: % of ownership: _% 43. Customer lists, mailing lists, or other compilations √ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe..... 44. Any business-related property you did not already list **∡** No ☐ Yes. Give specific information ...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☑ No. Go to Part 7. ☐ Yes. Go to line 47.	
	Current value of the portion you own?
47. Farm animals	Do not deduct secured claims or exemptions.
Examples: Livestock, poultry, farm-raised fish	
☑ No	
☐ Yes	
	<b>\$</b>

Chaquita Harris Debtor 1 Case number (if known), Last Name 48. Crops-either growing or harvested Z No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed Z No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☑ No Yes. Give specific information..... \$ 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Z No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 1,500.00 56. Part 2: Total vehicles, line 5 3,100.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 400.00 59. Part 5: Total business-related property, line 45 0.00 60 Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 0.00 62. Total personal property. Add lines 56 through 61. ..... 5,000.00 Copy personal property total -> 5,000.00 63. Total of all property on Schedule A/B. Add line 55 + line 62. 5,000.00

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Fill in this in	oformation to identify y	our case:	
Debtor 1	Chaquita First Name	Middle Name	HARRIS Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for the:	District	of
Case number (If known)			<del></del>

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief **□** \$ description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **□** \$ description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) IZ No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Nο Yes

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Debtor 1

Case number (if known)

#### Part 2: **Additional Page**

Brief description of the property and lii on Schedule A/B that lists this property	ne Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	<b>□</b> \$	
Line fromSchedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u> </u>	<b>□</b> \$	The state of the s
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>0</b> \$	00 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 1
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<b>s</b>	<b>U</b> \$	
Line from		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>u</b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:		<b></b>	
Line from Schedule A/B:		100% of fair market value, up to	
Brief description:	\$	<b>□</b> \$	The second secon
Line from Schedule A/B: ———		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ s	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	Value 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Brief description:	\$	<b>\$</b>	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>3</b>	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ <b>\$</b>	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	ıse:					
Debtor 1 Chaquita Harris						
	Name	Last Name				
	Name	Last Name				
United States Bankruptcy Court for the: Northern	District of Illinois					
Case number(If known)					☐ Check	if this is an
						led filing
Official Form 106D						
Schedule D: Creditor	s Who Ha	ave Claims So	ecur	ed by Pro	perty	12/15
Be as complete and accurate as possible information. If more space is needed, cop additional pages, write your name and car.  1. Do any creditors have claims secured by the complete in the c	se number (if kno	'30e till it out number the	oth are e entries,	qually responsible f and attach it to this	or supplying correct form. On the top of	t Fany
☑ No. Check this box and submit this for ☐ Yes. Fill in all of the information below.	m to the court with	your other schedules. You h	nave noth	ing else to report on	this form.	
Part 1: List All Secured Claims						
List all secured claims. If a creditor has n for each claim. If more than one creditor h As much as possible, list the claims in alphana.	ias a particular claii	mulist the other creditors in F	Part 2	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Z.1 Creditor's Name	Describe the pro	perty that secures the claim	:	\$	\$	\$
Creditor's ivame		W				
Number Street						
	As of the date yo	u file, the claim is: Check all t	that apply.	i		
	Contingent					
City State ZIP Code	Unliquidated Disputed					
Who owes the debt? Check one						
Debtor 1 only	Nature of lien. Ch					
Debtor 2 only	An agreement : car loan)	you made (such as mortgage or	secured			
Debtor 1 and Debtor 2 only		such as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien f		,			
		a right to offset)				
☐ Check if this claim relates to a community debt				•		
Date debt was incurred	Last 4 digits of a	COURT number				
2.2	A CONTRACTOR OF STREET, SPECIAL STREET, SPECIA	perty that secures the claim:		ethiristica a regional esta esta esta esta esta esta esta esta	a lunch entity to province a resolution conversion recovery states	ooffe, Vacampanima oo oo oo oo oo oo oo oo
Creditor's Name	Describe the prop	erry triat secures the claim:		\$	\$\$	S
	:					
Number Street			V*******			
		ı file, the claim is: Check all ti	hat apply.			
	Contingent					
City State ZIP Code	Unliquidated Disputed					
Who owes the debt? Check one.						
Debtor 1 only	Nature of lien. Che					
Debtor 2 only	An agreement y car loan)	ou made (such as mortgage or s	secured			
Debtor 1 and Debtor 2 only		uch as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien fr	om a lawsuit				
Check if this claim relates to a community debt	Other (including	a right to offset)	**************************************			
Date debt was incurred	Last 4 digits of ac	count number				
Add the dollar value of your entries in C			re:	Contractive to the Contractive	anni errete er	

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Chaquita Harris

Debtor 1

Case number (it known) First Name **Additional Page** Column A Column B Column C Part 1: Amount of claim Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed that supports this Do not deduct the portion by 2.4, and so forth. value of collateral. claim If any Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent City State ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 anly An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number ____ ___ Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

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Dehter	4	

			9	
Chaquita H	Harris Middle Name	Last Name		Case number (if known)

	Part 2: List Others to Be Notified for a Debt That You Already Listed							
)	ou have m	ying to collect from you	u for a debt you owe to or any of the debts tha	o someone else, list t it vou listed in Part 1.	r a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to			
					On which line in Part 1 did you enter the creditor?			
	Name			5.44II	Last 4 digits of account number			
	Number	Street			_			
		0.1001						
	*				<del></del>			
	City		State	ZIP Code	<del></del>			
					On which line in Part 1 did you enter the creditor?			
	Name				Last 4 digits of account number			
	Number	Street			_			
		, , , , ,						
	- 100				····			
	City		State	ZIP Code	_			
					On which line in Part 1 did you enter the creditor?			
	Name				Last 4 digits of account number			
	Number	Street	***************************************		_			
					-			
	City	***************************************	State	ZIP Code	-			
					On which line in Part 1 did you enter the creditor?			
	Name				Last 4 digits of account number			
	Number	Street			-			
					-			
	City		State	ZIP Code	-			
					On which line in Part 1 did you enter the creditor?			
	Name				Last 4 digits of account number			
	Number	Street						
7	City		State	ZIP Code				
					On which line in Part 1 did you enter the creditor?			
	Name		<del></del>		Last 4 digits of account number			
	Number	Street						
				THE STATE OF THE S				
	City		State	ZIQ Code				

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Harris and adversarial statement and a statement of the s	Document Page 25 of 53			
Fill in this information to identify your case:				
Debtor 1 Chaquita Harris				
First Name Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Northern Distri	ict of Illinois			
	or or mirrors		☐ Che	eck if this is an
Case number (If known)	<del></del>			ended filing
Official Form 106E/F				
	Who Have Unsecured Clair	me		12/15
	art 1 for creditors with PRIORITY claims and Part 2 for			
A/B: Property (Official Form 106A/B) and on Sch- creditors with partially secured claims that are li-	, ,	Official Form red by Propert	106G). Do no y. If more sp	t include any ace is
<ol> <li>Do any creditors have priority unsecured clai</li> <li>No. Go to Part 2.</li> </ol>	ms against you?			
Yes.				
2. List all of your priority unsecured claims. If a	creditor has more than one priority unsecured claim, list t			
	If a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's r			
unsecured claims, fill out the Continuation Page	of Part 1. If more than one creditor holds a particular clain	n, list the other	creditors in Pa	art 3.
(For an explanation of each type of claim, see th	e instructions for this form in the instruction booklet.)		4.5	A 4
		Total claim	Priority amount	Nonpriority amount
.1			amount	amount
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
, none or and a range	When was the debt incurred?			
Number Street				
	<ul> <li>As of the date you file, the claim is: Check all that appl</li> </ul>	y.		
City State ZIP Code	─ ☐ Contingent			
,	Unfiquidated			
Who incurred the debt? Check one.  Debtor 1 only	☐ Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt				
•	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>			
Is the claim subject to offset?	Other. Specify			
O van				
2	+ (1 + 1 + 1 + 2 + 1 + 2 + 2 + 2 + 2 + 2 +			
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
· ······, • · · · · · · · · · · · · · ·	When was the debt incurred?			
Number Street	·			
	As of the date you file, the claim is: Check all that apply	<b>y</b> .		
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another				
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?	Other, Specify	_		
□ No				
□ Ves				

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Ent Name Middle Name Interest Name (of Innown)

Debtor 1

	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
	Last 4 digits of account number	\$	\$	\$\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	• • • • • • • • • • • • • • • • • • • •			
City State ZIP Code	Contingent Unliquidated			
State Zip Code	Disputed			
Who incurred the debt? Check one.	_ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
_	Other. Specify			
ls the claim subject to offset?				
□ No				
☐ Yes	те и при при при при при при при при при п			
	. 1918 - Proceedings State (1918), 1935 (marketing), 1935 (marketing), 1935 (marketing), 1936 (marketing), 193 Talah (1938)	esperança este de la la la calabate, face que que	euly committee market de la committee de la co	to the transposition are confidence as
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Tions of tame	Milhon some the date income do			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
State Zil Code	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated  Other. Specify			
s the claim subject to offset?				
□ No				
☐ Vec	e or the or end wallely consequent particles by a paying on the country of the country and all paying become of			
				and the second section of the sectio
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
,	When was the debt incurred?			
lumber Street	when was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
Dity State ZIP Code	Unliquidated			
	Disputed			
Who incurred the debt? Check one.	,			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
	intoxicated		danis di mala antang malancas ya santara.	referent) en en en et toe generalise en
Check if this claim is for a community debt				
Check if this claim is for a community debt sthe claim subject to offset?	Other. Specify			

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Case number (if known)

Chaquita Harris

Document

100	CISCAII OF TOUR NONPRI	UKIIY UI	isecured Claii	ms				
3.	Do any creditors have nonpriority							
	No. You have nothing to report in Yes	this part. S	ubmit this form to	o the court with your other schedules.				
4.	nonpriority unsecured claim, list the o	<b>ed claims i</b> reditor sena	n the alphabetic	cal order of the creditor who holds each claim. If a creditor ha laim. For each claim listed, identify what type of claim it is. Do no	s more	than one		
	moladed in Fart I. II those than one c	reallor notas	a particular clai	m, list the other creditors in Part 3.If you have more than three n	a list cla onpriori	aims aiready tv unsecured		
	claims fill out the Continuation Page of	of Part 2.		-	•	,		
					Tot	al claim		
4.1	Barnes Auto Group			Last 4 digits of account number 1 0 2 2				
	Nonpriority Creditor's Name			When was the debt incurred? 09/28/2016	\$	5,306.00		
	2125 N Cicero Ave			when was the debt incurred?				
	Chicago	IL	60639					
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.				
				☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only Debtor 2 only			☐ Disputed				
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONEDBIODITY upper und all-im-				
				Type of NONPRIORITY unsecured claim:  Student loans				
	☐ Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce				
				that you did not report as priority claims				
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Auto	į.			
	Yes			Other, Specify Auto				
4.2	and the contract of the contra	**************************************		in instrumental see instrumente mentra aluminare en aleman deput a minure en aleman en tredes kontralistativo municipalista.	me joya gega kata kata i			
4.2	Comcast   Nonpriority Creditor's Name			Last 4 digits of account number 6 9 6 6  When was the debt incurred? 05/01/2017	\$	1,096.00		
	1701 JFK Blvd			when was the debt incurred? 05/01/2017				
	Number Street	<del></del>		<del></del>				
	Philadelpia City	PA	19103	As of the date you file, the claim is: Check all that apply.				
	•	State	ZIP Code	Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only Debtor 2 only			☐ Disputed				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and anothe	er		Student loans				
	Check if this claim is for a commi	unity debt		Obligations arising out of a separation agreement or divorce				
	Is the claim subject to offset?	unity debt		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts				
	Mo			Other Specify Utility				
	☐ Yes			A Marie Control of the Control of th				
4.3	ComEd	turan Sela mentebutu bumba ber	er entre e to the seed of the seed on the ground seed.	era e eminerare sumanta succestra de cara sumana da sue e conocida, estantalle provinció e constante e constitudado	Levil 2 levil	Cherten Sweet and Cherten Control		
·	Nonpriority Creditor's Name			Last 4 digits of account number 3 0 4 1	\$	745.00		
	PO Box 6111			When was the debt incurred? 12/11/2017				
	Number Street Carol Stream	11	00407	_				
	City	IL State	60197 ZIP Code	- As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.			☐ Contingent				
	Debtor 2 only  Debtor 2 only			Unliquidated				
				☐ Disputed				
	Debtor 1 and Debtor 2 only			Type of NONDRIODITY				
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a commu	nity debt		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce</li></ul>				
	Is the claim subject to offset?			that you did not report as priority claims				

V No

Yes

✓ Other. Specify <u>Utility</u>

Debts to pension or profit-sharing plans, and other similar debts

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First Name Middle Name Last Name Last Name

Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Af	ter listing any entries on this page, r	number th	em beginning with	1 4.4, followed by 4.5, and so forth.		Total claim
4.4	Consumer Portfolio Serv			Last 4 digits of account number	T	_{\$_} 1,512.00
	Nonpriority Creditor's Name 19500 Jamboree Rd Suite 50	)		When was the debt incurred?	03/01/2016	
	Number Street Irvince	CA	92612	As of the date you file, the claim	n is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm Is the claim subject to offset?  No Yes	State	ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecution Student loans Obligations arising out of a sepa you did not report as priority clait Debts to pension or profit-sharin Other. Specify Auto	red claim: tration agreement or divorce that ms	
4.5	First Premier Nonpriority Creditor's Name	r e s Start de la lace		Last 4 digits of account number		\$ 394.00
	3820 N Louise Ave	·		When was the debt incurred?	12/01/2015	
	Sioux Falls	SD	57107	As of the date you file, the claim	is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe. Check if this claim is for a commuls the claim subject to offset?  No Yes	unity debt	ZIP Code	Contingent Unitquidated Disputed  Type of NONPRIORITY unsecure Student loans Obligations arising out of a separ you did not report as priority clain Debts to pension or profit-sharing Other. Specify Credit Card	ration agreement or divorce that ns g plans, and other similar debts	
4.6	Tmobile			Last 4 digits of account number		\$_1,285.00
	Nonpriority Creditor's Name  3625 132nd Ave SE  Number Street			When was the debt incurred?	01/01/2016	
	Bellevue	WA	98006	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			<ul><li>Unliquidated</li><li>Disputed</li></ul>		
	Debtor 1 only Debtor 2 only			Type of NANDRIADITY	ad alain.	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecure  Student loans	ea ciaim:	
	At least one of the debtors and another			Obligations arising out of a separa	ation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claim	IS	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing ☐ Other. Specify Phone Servi	pians, and other similar debts CE	

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Debtor 1

Chaquita Harris

Last Name

	я	rŧ	<b>2</b>
ы	ш		in a

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any en	tries on this page, n	ımber th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
4.7 City of Chica	900			Last 4 digits of account number	s 7,000.00
Nonpriority Creditor's	s Name			When was the debt incurred? 01/01/2017	\$_7,000.00
Number Stre Chicago	et	IL	60602	As of the date you file, the claim is: Check all that apply.	
Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and in At least one of	the debtors and another	State	ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tickets	
4.8 Village Of Be	ellwood		esti i i i i i i i i i i i i i i i i i i	Last 4 digits of account number	\$ 3,050.00
Village Of Be Nonpriority Creditor's 3200 Washir				When was the debt incurred?	<del></del>
Number Stree				An of the date was fills the bill to be a second	
Bellwood City		IL State	60101 ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	
Debtor 1 only Debtor 2 only Debtor 1 and E At least one of	the debtors and another claim is for a commusect to offset?			☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Tickets	;
4.9 Dupage Cour	nty Circuit Court	Signatura (an Sinita Anna)	о по то то то то то под сумену сумеру на во бого у во	Last 4 digits of account number 3 0 7 3	\$ <u>169.00</u>
Nonpriority Creditor's 505 N County Number Street	/ Farm Rd			When was the debt incurred? 09/29/2014	
Wheaton	l .	IL	60187	As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	Contingent	
Debtor 1 only Debtor 2 only Debtor 1 and D				☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans	
	he debtors and another			Obligations arising out of a separation agreement or divorce that	
☐ Check if this of the claim subjection  ☐ No	claim is for a communect to offset?	ity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify <u>Tickets</u>	

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Debtor 1

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### Part 3:

### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street	And the second s	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claim
		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
	21. 0008	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	A SA A VANCOS INCOME.	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Last 4 digits of account number
City next consense of the control of consense and control of the c	State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Vame		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
***************************************		Claims
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number

Debtor 1

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

					Total claim	
Total claims	6a	Domestic support obligations	6a.		\$	
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.		\$	
	6c	. Claims for death or personal injury while you were intoxicated	6c.		\$	
	6d	. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+	\$	
	6e	. <b>Total.</b> Add lines 6a through 6d.	6e.		\$	***************************************
					Total claim	
Total claims	6f.	Student loans	6f.		\$	
Total claims from Part 2		Obligations arising out of a separation agreement or divorce that you did not report as priority			\$	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.		\$	
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		:	\$\$ \$\$	
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	+	\$\$ \$\$	20,557.00

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Estimated and the same	CONTRACTOR			NAME AND ADDRESS OF THE PROPERTY OF THE PROPER	
Fill in thi	s information to i	dentify your case:			
Debtor	Chaquita H	arris			
Deptor	First Name	Middle Name	Last Name	<del></del>	
Debtor 2 (Spouse if file	ling) First Name	Middle Name	Last Name		
		for the: Northern District of I	IIITOIS		
Case numi (if known)	ber	***************************************	· <del>····</del>		☐ Check if this is an
					amended filing
Officia	I Form 106	G G			
Scho	dulo G. E	voorton Co		He are the state of the state o	
SCILE	uuie G. E	xecutory cor	itracts and	Unexpired Leases	12/15
1. Do yo  I No	n. If more space is pages, write your u have any execute. Check this box and is. Fill in all of the in	s needed, copy the addition name and case number (interpretation of the countracts or unexpired the countracts of the co	onal page, fill it out, nur if known). ed leases? art with your other schedu e contracts or leases are	gether, both are equally responsible for supply mber the entries, and attach it to this page. On ules. You have nothing else to report on this form. listed on Schedule A/B: Property (Official Form 1	the top of any
examp	parately each per ple, rent, vehicle le red leases.	rson or company with who ease, cell phone). See the	om you have the contra instructions for this form	ict or lease. Then state what each contract or in the instruction booklet for more examples of example	lease is for (for xecutory contracts and
Perso	n or company witi	h whom you have the con	tract or lease	State what the contract or lease is for	
2.1					
Name					
Numbe	r Street				
, (411100	. 0.000.				
City		State ZIP Code			
2.2					A A Committee of the Co
Name					
Number	r Street				
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2.3	14.14			t en grant de la company d	
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State

ZIP Code

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Debtor 1	1	nr	eh	D	
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Chaquita Harris

t Name Middle Name

unient Page 33 01 3

Case number (if known)_____

		 ٠	

### **Additional Page if You Have More Contracts or Leases**

Last Name

Person or company with whom you have the contract or lease

What the contract or lease is for

Name	····		·····	
Number	Street	······································		170700000
City		State	ZIP Code	**************************************
Name				
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lineary transfer and the second				.9		
Fill in this	information to iden	ntify your case:				
Debtor 1	Chaquita Harri	is				
Debtor 2	First Name	Middle Name	Last Name			
	ng) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court for t	the: Northern District of III	inois			
Case numbe	er			ĺ		
(If known)					☐ Check if	this is ar
					amended	d filing
Official	Form 106H					
Sched	lule H: Yo	ur Codebtor	s			12/15
1. Do you  1. Do you  Yes 2. Within the Arizona  Yes 1. Yes 2. Within the Arizona  Yes 1. No.	the entries in the borr (if known). Answer have any codebtors the last 8 years, have, California, Idaho, Lo Go to line 3.  Did your spouse, for yes. In which communication the second communication is a second communication to the second communication in the second communication is a second communication in the second communication in the second communication in the seco	coxes on the left. Attacher every question.  (a) (If you are filing a joint ye you lived in a communication, Nevada, New Marmer spouse, or legal equality or legal equality.	case, do not list either  nity property state o exico, Puerto Rico, Te	mation. If more spato this page. On the spage of the spouse as a codeb or territory? (Communicates, Washington, and the time?	Unity property states and territories include	110 04
	ivame or your spouse, form	er spouse, or legal equivalent				
•	Number Street					
	City	State		Code		
Schedui Schedui	n ime 2 again as a d le D (Official Form 1	codeptor only if that per	son is a quarantor o	r cosigner. Make su r Schedule G (Offic	pouse is filing with you. List the person ure you have listed the creditor on cial Form 106G). Use Schedule D,	
oorarii.	our codestor				lumn 2: The creditor to whom you owe the	debt
3.1				Ch	neck all schedules that apply:	
Name					Schedule D, line	
					Schedule E/F, line	
Number	Street				Schedule G, line	
City		State	ZIF	Code		
.2						
Name					Schedule D, line	
Number	Street				Schedule E/F, line	
					Schedule G, line	
City	7311110-11	State	ZIP	Code		
.3				m	Schedule D, line	
Name					Schedule E/F, line	
Number	Street				Schedule G, line	
City		State				
		State	ZIP	Code		

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Debtor 1

Chaquita Harris
First Name Middle N Middle Name Last Name

Case number (if known)_

Column 1	: Your codebtor			Column 2: The creditor to whom you owe the deb
1				Check all schedules that apply:
Name				Schedule D, line
71-111-				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
****				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		Shada .	N. D. C.	
City		State	ZIP Code	
Name				Schedule D, line
				☐ Schedule E/F, line
Number	Street			□ Schedule G, line
City		State	ZiP Code	
				Schedule D, line
Name				Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	_
·			0000	
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rianiso.	oute			
City		State	ZIP Code	and the second s
Name			····	Schedule D, line
				Schedule E/F, line
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Number	Street			Schedule G, line
City		State	ZIP Code	_
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Number	Street			Schedule G, fine

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Debtor 1 Chaquita Harris First Name Middle Name Last Name  Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Case number (If known)  Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  Official Form 106I  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a constrate short to the form of the state of the species of the state of the species
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Case number (if known)  Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  Official Form 106!  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If two married peoples are filing with you, do not include information about your spouse is free to the transfer of the properties of the politic po
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Case number (if known)  Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  Official Form 106!  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If two married peoples are filing with you, do not include information about your spouse is free to the transfer of the properties of the politic po
United States Bankruptcy Court for the: Northern District of Illinois  Case number (if known)  Check if this is:  Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  Official Form 106I  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse.
Case number (If known)  Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Case number (If known)  Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Official Form 1061  Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Official Form 1061  Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Official Form 106I  Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
supplying correct information, it you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse.
" You die gepalateu allu your Suouse is not ining with you not include information about your engage. It made a made it made a suit is
Separate Sheet to this form. On the top of any additional hages, write your name and case number (if known). Anough a case number (if known).
separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.
Part 1: Describe Employment
4 Fill in your ample, many
1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse
If you have more than one job,
attach a separate page with information about additional Employment status
employers.
Include part-time, seasonal, or self-employed work,
Occupation may include student  Occupation  Hairstylist
or homemaker, if it applies.
Employer's name Braids by Quita
Employer's address 906 Madison  Number Street Number Street
Number Street Number Street
Oak Park IL 60301  City State ZIP Code City State ZIP Code
Development Att. 2.5
How long employed there? 5
Part 2: Give Details About Monthly Income
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines
below. If you need more space, attach a separate sheet to this form.
For Debtor 1 For Debtor 2 or
2. List monthly gross wages, salary, and commissions (before all payroll
deductions). If not paid monthly, calculate what the monthly wage would be. 2. 2.000.00
\$
3 Fetimate and list monthly eventing new
3. Estimate and list monthly overtime pay.  3. +\$ 0.00 + \$

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Chaquita Harris Debtor 1 Case number (if known), For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans 5d. 5e insurance 5e 5f. Domestic support obligations 5f. 5g. Union dues 5g. 5h. Other deductions. Specify: 5h. 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 6. 3,000.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 0.00 8b. Interest and dividends 8b 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 Specify: 8f. 0.00 8g. Pension or retirement income 8g 8h. Other monthly income. Specify: 8h. 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 0.00 10. Calculate monthly income. Add line 7 + line 9. 3.000.00 3.000.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. 🛨 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 3,000.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Mo. ☐ Yes. Explain:

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Fill in this information to iden	tify your case:			
Debtor 1 Chaquita Harris	3			
First Name  Debtor 2	Middle Name Last Name	Check if th		
(Spouse, if filing) First Name	Middle Name Last Name		ended filing	Amadidian abanda 40
United States Bankruptcy Court for t	he: Northern District of Illinois	expens	es as of the following	tpetition chapter 13 g date:
Case number (If known)	1001111	MM / DE	D/ YYYY	
Official Form 106J				
Schedule J: Y	our Expenses			12/15
Be as complete and accurate as information. If more space is ne (if known). Answer every questi	possible. If two married people are fil eded, attach another sheet to this forn on.	ing together, both are equally re n. On the top of any additional p	esponsible for supply ages, write your nan	
Part 1: Describe Your H	ousehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in	a separate household?			
☐ No				
Yes. Debtor 2 must	file Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
2. Do you have dependents?	□ No	Dependent's relationship to	D	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	314	C.H	14	☐ No ☑ Yes
	GT (	C.H	8	☐ No
	Lid.	;		2 Yes
			<del></del>	U No □ Yes
				☐ No
				☐ Yes
				☐ No ☐ Yes
Do your expenses include	☐ No			Constitution of the second
expenses of people other than yourself and your dependents:				
art 2: Estimate Your Ong	oing Monthly Expenses			
expenses as of a date after the ba applicable date.	ur bankruptcy filing date unless you ar ankruptcy is filed. If this is a suppleme	e using this form as a supplement of the box and the b	ent in a Chapter 13 ca at the top of the form	ase to report and fill in the
nclude expenses paid for with no	n-cash government assistance if you	know the value of		
	ed it on Schedule I: Your Income (Offic		Your expen	ses
any rent for the ground or lot.	expenses for your residence. Include f	irst mortgage payments and	4. \$	1,700.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or 4c. Home maintenance repair			4b. \$	
<ul><li>4c. Home maintenance, repair,</li><li>4d. Homeowner's association of</li></ul>				
-a. Homeowilet's association (	a condominium dues		4d. \$	

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Debtor 1 Chaquita Harris
First Name Middle Name Last Name Case number (if known)

			Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:  6a. Electricity, heat, natural gas	6a.	•	250.00
	6b. Water, sewer, garbage collection	6b.	\$	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.		400.00
8.	Childcare and children's education costs	8.	\$	
9.	Clothing, laundry, and dry cleaning	9.	\$	30.00
10.	Personal care products and services	10.	\$	25.00
11.	Medical and dental expenses	11.	\$	
12.	Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14.	Charitable contributions and religious donations	14.	\$	
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	
	15b. Health insurance	15b.	\$	
	15c. Vehicle insurance	15c.	\$	
	15d. Other insurance. Specify:	15d.	\$	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.	\$	
	17d. Other. Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$ <u>·</u>	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	~~~~~
	20e. Homeowner's association or condominium dues	20e.	\$	

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Debtor 1	Chaquita Harris First Name Middle Name Last Name	Case number (if known)	·······	
21. <b>Oth</b>	er. Specify:	21.	+\$	
22. <b>Cal</b> e	culate your monthly expenses.		Unit has are made un so conservation	Start Section between constitution and constitution for the section of the sectio
22a	. Add lines 4 through 21.	22a.	\$	2,805.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	
22c	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	2,805.00
23. <b>Calc</b> i	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	<b>23a</b> .	\$	3,000.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,805.00
23c.	Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	<b>23c</b> .	\$	195.00
24. <b>Do y</b>	ou expect an increase or decrease in your expenses within the year after you	file this form?		
24. <b>Do y</b>	ou expect an increase or decrease in your expenses within the year after you	file this form?		

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

₩ No.

Yes.

Explain here:

Case 18-02535 Doc 1 Filed 01/30/18 Entered 01/30/18 12:31:36 Desc Main Document Page 41 of 53 Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: ___ District of ____ Case number (If known) Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Yes. Name of person_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Signature of Debtor 2

Date MM / DD / YYYY

that they are true and correct.

Date 01 30 3618

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	nformation to identify	y your case:					
Debtor 1	Chaquita Harris						
Debtor 2	First Name	Middle Name		Last Name			
(Spouse, if filing		Middle Name		Last Name			
	Bankruptcy Court for the:	Northern District of	Illinois				
Case number (If known)			<del></del>				Check if this is an
		WARREN					amended filing
066							
	Form 107						
				·		for Bankruptcy	
intormation.	If more space is nee	ded, attach a separa	ied peop ate sheet	ole are filing to t to this form.	gether, both are equa On the top of any add	illy responsible for supplyir itional pages, write your na	ng correct me and case
number (if kn	own). Answer every	question.			,,,	word pages, write your na	and dase
Part 1: G	ive Details About	Your Marital Sta	tus and	Where You	Lived Before		
1. What is y	our current marital s	tatus?					
☐ Marrie ☑ Not m							
- 110(111	iomed						
	e last 3 years, have y	ou lived anywhere	other th	an where you	live now?		
☐ No ☑ Yes I	ist all of the places yo	u lived in the last 3 v	pare Do	not include wh	toro you had now		
	tor 1:	a neod ni tric lade o y		_			_
			lived		ebtor 2:		Dates Debtor 2 lived there
					Same as Debtor 1		
າາ							Same as Debtor 1
33	9 Bluff		From	01/01/2009			Same as Debtor 1
Num				0 <u>1/01/20</u> 09 0 <u>1/01/20</u> 15	Number Street	The state of the s	From
Nun	nber Street				Number Street		
Nun		IL 60525 State ZIP Code				State 719 Code	From
Num	nber Street			0 <u>1/01/20</u> 15	City	State ZIP Code	From To
Num	nber Street			0 <u>1/01/20</u> 15		State ZIP Code	From
Num	Grange		To	0 <u>1/01/20</u> 15	City	State ZIP Code	From To
La City	Grange		To -	0 <u>1/01/20</u> 15	City Same as Debtor 1	State ZIP Code	FromTo Same as Debtor 1
La City	Grange		To	0 <u>1/01/20</u> 15	City Same as Debtor 1	State ZIP Code	From To  Same as Debtor 1  From
La City	Grange		To	0 <u>1/01/20</u> 15	City Same as Debtor 1	State ZIP Code	From To  Same as Debtor 1  From
Num  La City  Num  City  3. Within the	Grange  Street  Street	State ZIP Code  State ZIP Code	To From To	01/01/2015	City  Same as Debtor 1  Number Street  City	State ZIP Code	From To  Same as Debtor 1  From To
Num  La City  Num  City  3. Within the states and	Grange  Street  Street	State ZIP Code  State ZIP Code	To From To	01/01/2015	City  Same as Debtor 1  Number Street  City		From To  Same as Debtor 1  From To
Num  La City  Num  City  3. Within the states and	Grange  Street  Street	State ZIP Code  State ZIP Code  t ever live with a sp	To From To  ouse or o, Louisia	01/01/2015	City  Same as Debtor 1  Number Street  City  nt in a community prolew Mexico, Puerto Ric	State ZIP Code	From To  Same as Debtor 1  From To
Num  La City  Num  City  3. Within the states and	Grange  Street  Street	State ZIP Code  State ZIP Code  t ever live with a sp	To From To  ouse or o, Louisia	01/01/2015	City  Same as Debtor 1  Number Street  City  nt in a community prolew Mexico, Puerto Ric	State ZIP Code	From To  Same as Debtor 1  From To

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btor 1	Chaquita Harris		Casan	mhor			
	First Name Middle Name Las	t Name	Case no	mber (if known)			
Fill in If you							
	os. Chi in the details.	Debtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions a exclusions)		
	From January 1 of current year until he date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$2,000.00	Wages, commissions, bonuses, tips Operating a business	\$		
	For last calendar year:  January 1 to December 31, 2017	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$30,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$		
F	or the calendar year before that:	Wages, commissions, bonuses, tips	40.007.00	Wages, commissions, bonuses, tips			
(-	January 1 to December 31, 2016	Operating a business	\$ <u>18,887.00</u>	Operating a business	\$		
List ea	ing and lottery winnings. If you are filing ach source and the gross income from e o s. Fill in the details.				e under Debtor 1.		
<b>—</b> 16	is. Fill in the details.	Debtor 1		Debtor 2	e a trattactera con a tractacte de la composición de la composición de la composición de la composición de la c		
		Sources of income	Gross income from				
		Describe below.	each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)		
F th	rom January 1 of current year until		each source (before deductions and exclusions)	Describe below.	each source (before deductions an exclusions)		
F tł	from January 1 of current year until he date you filed for bankruptcy:		each source (before deductions and exclusions)	Describe below.	each source (before deductions an exclusions)		
F tł	from January 1 of current year until he date you filed for bankruptcy:		each source (before deductions and exclusions)	Describe below.	each source (before deductions an exclusions)		
th F	he date you filed for bankruptcy: or last calendar year:		each source (before deductions and exclusions)  \$	Describe below.	each source (before deductions an exclusions)  \$ \$ \$ \$		
th F	he date you filed for bankruptcy:	3	each source (before deductions and exclusions)  \$  \$	Describe below.	each source (before deductions an exclusions)  \$ \$ \$ \$ \$ \$ \$		
Fi (J	or last calendar year:  January 1 to December 31,2017		each source (before deductions and exclusions)  \$  \$  \$	Describe below.	ssssssssss		
Fr (J	or last calendar year:  January 1 to December 31,2017	9	each source (before deductions and exclusions)  \$ \$ \$	Describe below.	each source (before deductions ar exclusions)  \$ \$ \$ \$ \$ \$ \$		

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Debtor 1	Chaquita Harris		_ Case	number (if known)	
	First Name Middle Name Last Name			-	
Part 3:	List Certain Payments You Made Befo	ere Ven Eiler	l for Doubours		
rait o.	List Certain Fayments You made Ben	ore You Filed	tor Bankruptcy		
6 Are eit	ner Debtor 1's or Debtor 2's debts primarily	aanaumas dab	oto 3		
₩ NO.	Neither Debtor 1 nor Debtor 2 has primaril "incurred by an individual primarily for a person	onal, family, or	household purpose."		1(8) as
	During the 90 days before you filed for bankri	uptcy, did you p	ay any creditor a total o	f \$6,425* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom yo total amount you paid that creditor. E child support and alimony. Also, do a	Do not include p	payments for domestic si	upport obligations, such as	
	* Subject to adjustment on 4/01/19 and every				
<b>☑</b> Yes	. Debtor 1 or Debtor 2 or both have primarily			•	
	During the 90 days before you filed for bankru			\$600 or more?	
	☑ No. Go to line 7.				
	Yes. List below each creditor to whom you	u paid a total of	\$600 or more and the to	atal amount you naid that	
	creditor. Do not include payments for alimony. Also, do not include payment	r domestic supr	ort obligations, such as	child support and	
	dimony. Also, do not include paymen	ins to an attorn	еу тог иль ралктирусу са	se.	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	0		\$	\$	☐ Mortgage
	Creditor's Name				Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
	Creditor's Name	-MAN-A	\$	\$	☐ Mortgage
					🔲 Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
			\$	\$	<b>[77]</b>
	Creditor's Name			— <del>— — — — — — — — — — — — — — — — — — </del>	☐ Mortgage
					☐ Car☐ Credit card
	Number Street				Loan repayment
					Suppliers or vendors
	A14.				Other
	City State ZIP Code				Uniei

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or 1	Chaquita Harris	Last Name	· · · · · · · · · · · · · · · · · · ·	<del>-</del>	Case number (if known	)
	The state of the s	Last Name				
Insid corpo agen such	orations of which you are a at, including one for a busin as child support and alimo	any general partners n officer, director, pe ess you operate as a	; relatives of any erson in control, o	general partners; r owner of 20% or	partnerships of white more of their voting	who was an insider?  ch you are a general partner; g securities; and any managing or domestic support obligations,
<b>Z</b>						
u Y	es. List all payments to an	insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			\$	\$	
	Number Street					
			444444444444444444444444444444444444444			
	City	State ZIP Code		\$	\$	
	Insider's Name			~		
	Number Street					
•						
i	City	State ZIP Code				
in ins nolud 1 No	sider? le payments on debts guar	anteed or cosigned t	oy an insider.			n account of a debt that benefit
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Î	nsider's Name			\$	\$	
7	number Street					
=			<u></u>			
C	City	State ZIP Code				
īr	nsider's Name		· · · · · · · · · · · · · · · · · · ·	\$	. \$	
N	lumber Street					
C	ity	State ZIP Code	-			

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Chaquita Harris		Case number (if too)	am)	
First Name Middle Name Last Name		odos (taribo) (izmo)	m10,	
-				
nin 1 year before you filed for bankruptcy, w	vere you a party in any	lawsuit, court action, or adm	ninistrative prod	eeding?
contract disputes.	es, smail claims actions,	divorces, collection suits, pate	ernity actions, su	pport or custody modification
No				
Na	ture of the case	Court or agency		Status of the case
Case title		Court Name		Pending
				On appeal
		Number Street	·····	Concluded
Case number				
		City Sta	ite ZIP Code	***************************************
Case title		Court Name		Pending
				On appeal
		Number Street		☐ Concluded
Case number				
		City Sta	te ZIP Code	·····
es. Fill in the information below.	Describe the proper	ty	Date	Value of the property
		•		, , , , , , , , , , , , , , , , , , , ,
Condition Nu	**************************************			\$
Creditor's Name			***	· · · · · · · · · · · · · · · · · · ·
Number Street	 Explain what happe	ned		
	_			
City State ZIP Code				
	Describe the proper	ty	Date	Value of the property
				, , , , , , , , , , , , , , , , , , , ,
				\$
Creditor's Name				
Number Street	Explain what happer	ned		
	Dranatuu	one one of		
	/			
City				
State ZIP Code				
	Identify Legal Actions, Repossess in 1 year before you filed for bankruptcy, wall such matters, including personal injury cast contract disputes.  No Yes. Fill in the details.  Case title  Case number  Case number  Case number  Case title  Case number  Case title  Case in the details below.  Case title in the information below.  Creditor's Name  Number Street  City State ZIP Code	Identify Legal Actions, Repossessions, and Foreclosus In 1 year before you filed for bankruptcy, were you a party in any all such matters, including personal injury cases, small claims actions, contract disputes.  No Yes. Fill in the details.  Nature of the case  Case title  Case number  Case number  Case number  Case in the information below.  Describe the property was in Proper	Identify Legal Actions, Repossessions, and Foreclosures  In 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or admail such matters, including personal injury cases, small claims actions, divorces, collection suits, pate contract disputes.  No  Case title	Identify Legal Actions, Repossessions, and Forectosures

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	TIS	Ca	ase number (if known)	
First Name Mi	iddle Name Last	Name	(I MIOWI)	×41.
Vithin 90 days before y	you filed for bankru	ptcy, did any creditor, including a bank or	financial institution, set off any a	mounts from your
eccounts or refuse to n	nake a payment bed	cause you owed a debt?	-	-
ZÍ No				
Yes. Fill in the details	<b>S</b> .			
		Describe the action the creditor took	Date action	Amount
O27	·	-	was taken	Amount
Creditor's Name				
Number Street		•		\$
Monther Officer				
******	· · · · · · · · · · · · · · · · · · ·	_		
City	State ZIP Code	Last 4 digits of account number: XXXX		
lithin 1 year before you	u filed for bankrupte	cy, was any of your property in the posses	sion of an assignee for the benef	it of
	inted receiver, a cus	stodian, or another official?		
<b>1</b> No <b>1</b> Yes				
⊒ Yes				
5: List Certain G	ifts and Contribut	tions		
	nts and contribu	uviia		
isht o				
inim z years before yo	u filed for bankrupt	tcy, did you give any gifts with a total value	e of more than \$600 per person?	
<b>1</b> No		tcy, did you give any gifts with a total value	e of more than \$600 per person?	
No Yes. Fill in the details		tcy, did you give any gifts with a total value	e of more than \$600 per person?	
No Yes. Fill in the details	for each gift.		e of more than \$600 per person?	
<b>1</b> No	for each gift.	tcy, did you give any gifts with a total value  Describe the gifts	Dates you gave	Value
No Yes. Fill in the details  Gifts with a total value	for each gift.			Value
No Yes. Fill in the details  Gifts with a total value	for each gift.		Dates you gave	Value
No Yes. Fill in the details  Gifts with a total value	for each gift.		Dates you gave	Value \$
No Yes. Fill in the details Gifts with a total value per person	for each gift.		Dates you gave	
No Yes. Fill in the details Gifts with a total value per person	for each gift.		Dates you gave	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave t	for each gift.		Dates you gave	
No Yes. Fill in the details Gifts with a total value per person	for each gift.		Dates you gave	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to Number Street	for each gift. e of more than \$600		Dates you gave	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave t	for each gift.		Dates you gave	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to Number Street	for each gift. e of more than \$600 he Gift  State ZIP Code		Dates you gave	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to Number Street	for each gift. e of more than \$600 he Gift  State ZIP Code		Dates you gave	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to Number Street  City  Person's relationship to y  Gifts with a total value of	for each gift. e of more than \$600 the Gift  State ZIP Code		Dates you gave the gifts	
No Yes. Fill in the details  Gifts with a total value per person  Person to Whorn You Gave to Number Street  City  Person's relationship to y	for each gift. e of more than \$600 the Gift  State ZIP Code	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to Number Street  City  Person's relationship to y  Gifts with a total value of	for each gift. e of more than \$600 the Gift  State ZIP Code	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to Number Street  City  Person's relationship to y  Gifts with a total value of	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$ \$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to the City  Person's relationship to y  Gifts with a total value of per person	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$\$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to the City  Person's relationship to y  Gifts with a total value of per person	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$\$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to the City  Person's relationship to y  Gifts with a total value of per person	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to the City  Person's relationship to y  Gifts with a total value of per person	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to the control of the	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$
No Yes. Fill in the details  Gifts with a total value per person  Person to Whom You Gave to the control of the	for each gift. e of more than \$600 he Gift  State ZIP Code ou	Describe the gifts	Dates you gave the gifts	\$

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		Case number (if known)		
	First Name Middle Name La	ost Name		
Vithin	2 years before you filed for bankru	iptcy, did you give any gifts or contributions with a total valu	ue of more than \$6	600 to any charity
No	)			
☐ Ye	s. Fill in the details for each gift or cor	ntribution.		
G	ifts or contributions to charities	Describe what you contributed	Data	M-1
	nat total more than \$600	2007/20 What you containsated	Date you contributed	Value
		-		\$
Cha	rity's Name			Ψ
		-		\$
Num	nber Street	+		
City	State ZIP Code	-		
·				
	1			
6:	List Certain Losses			
] Yes				
De	scribe the property you lost and w the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A.R. Deports.	Date of your loss	Value of property lost
De	scribe the property you lost and w the loss occurred			
De	escribe the property you lost and w the loss occurred	Include the amount that insurance has paid. List pending insurance		
De	escribe the property you lost and w the loss occurred	Include the amount that insurance has paid. List pending insurance		lost
De ho	w the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		lost
De ho	w the loss occurred  List Certain Payments or Tran	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sfers	loss	lost \$
De ho	w the loss occurred  List Certain Payments or Tran  1 year before you filed for bankrupt	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sfers  tcy, did you or anyone else acting on your behalf pay or tran	loss	lost \$
7: ithin	w the loss occurred  List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy o	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	loss	lost \$
7: ithin ou cor	w the loss occurred  List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy o	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sfers  tcy, did you or anyone else acting on your behalf pay or tran	loss	lost \$
7:  Tithin corclude	w the loss occurred  List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy o	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	loss	lost \$
7:  Tithin corclude	List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy of  2 any attorneys, bankruptcy petition pre	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	isfer any property	\$to anyone
7: ithin a corricude	List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy of  2 any attorneys, bankruptcy petition pro	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	\$to anyone
7: tthin u corclude No Yes.	List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy of  2 any attorneys, bankruptcy petition pre	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or	\$to anyone
7: Lithin / No Yes.	List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy of  2 any attorneys, bankruptcy petition pro	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	\$to anyone
7: ithin / No Yes.	List Certain Payments or Tran  1 year before you filed for bankrupt  any attorneys, bankruptcy petition pre  Fill in the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	\$to anyone
7: ithin / No Yes.	List Certain Payments or Tran  1 year before you filed for bankrupt  any attorneys, bankruptcy petition pre  Fill in the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	to anyone  Amount of payments
7: ithin vu corclude No Yes.	List Certain Payments or Tran  1 year before you filed for bankrupt  any attorneys, bankruptcy petition pre  Fill in the details.  son Who Was Paid	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	to anyone  Amount of payments
7: ithin / No Yes.	List Certain Payments or Tran  1 year before you filed for bankrupt  1 sulted about seeking bankruptcy of  2 any attorneys, bankruptcy petition pre  3 Fill in the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	to anyone  Amount of payments
7: ithin 'su cor	List Certain Payments or Tran  1 year before you filed for bankrupt  any attorneys, bankruptcy petition pre  Fill in the details.  son Who Was Paid	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  sfers  tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?  eparers, or credit counseling agencies for services required in your	ioss  Isfer any property  our bankruptcy.  Date payment or transfer was	lost \$

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	Chaquita Harris		Case number (if known)		
	First Name Middle Name L	ast Name	odse Hamber (ii kilowi)_		
		Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid				
	News	MANAY			\$
	Number Street				æ
				<del></del>	Ψ
	City State ZIP Code	····			
	Email or website address	***************************************			
	Person Who Made the Payment, if Not You	•			
<b>2</b> N	not include any payment or transfer that No Yes. Fill in the details.	you listed on line 16.			
		Description and value of any propert	y transferred	Date payment or transfer was made	Amount of payr
	Person Who Was Paid	_		made	
	Number Street				\$
	Number Street				\$
	City State ZIP Code				\$
Withing trans Included to the control of the contro	City State ZIP Code in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha	r business or financial affairs? made as security (such as the granting			n property
Withing trans Included to the control of the contro	City State ZIP Code in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha	r business or financial affairs? made as security (such as the granting		ortgage on your prop	n property perty).
Withing transfer included to the control of the con	City State ZIP Code in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe
Within trans Included Do not one of the Year of Year of the Year o	City State ZIP Code in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo es. Fill in the details.	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe
Within transfer included to the property of th	City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo les. Fill in the details.  Person Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe
Within transfinction of the transfer of the tr	City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo es. Fill in the details.  Person Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe
Within trans Included to the control of the control	City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo les. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe
Within transcription in the control of the control	City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo fes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe
Within transcription in the control of the control	City State ZIP Code  in 2 years before you filed for bankru sferred in the ordinary course of your de both outright transfers and transfers ot include gifts and transfers that you ha lo les. Fill in the details.  Person Who Received Transfer  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property	of a security interest or m  Describe any property of	ortgage on your prop	n property  perty).  Date transfe

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btor 1	Chaquita Harris		Case number (if k	nowa)	
	First Name Middle Name	Last Name	·		
. Withi	in 10 years before you filed for bank	kruptcy, did you transfer any prope	rty to a self-settled tru	st or similar device of	which you
are a	beneficiary? (These are often called	d asset-protection devices.)			•
<b>☑</b> N					
U Y	'es. Fill in the details.				
		Description and value of the prop	erty transferred		Date transfer
					was made
N.	ame of trust				: 
		man Andrews			:
		_			
					:
-4.0				and the contract of the contra	
	List Certain Financial Accou				
Withi	n 1 year before you filed for bankru	ptcy, were any financial accounts o	or instruments held in	your name, or for your	benefit.
close	ed, sold, moved, or transferred?				
Inclu	de checking, savings, money mark	et, or other financial accounts; cert	ificates of deposit; sh	ares in banks, credit ur	nions,
Droke V No	erage houses, pension funds, coop	eratives, associations, and other fi	nancial institutions.		
	o es. Fill in the details.				
	es. I in in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer
				or transferred	ologing of dansie
Ñ	Name of Financial Institution		<b>D</b>		
		XXXX	Checking	***************************************	\$
N	lumber Street		☐ Savings		
		_	Money market		
c	City State ZIP Code	_	☐ Brokerage		
			Other		
		XXXX-	Checking		
N.	iame of Financial Institution		Savings	-th-	\$
N	lumber Street	<del>-</del>	☐ Money market		
	oniber offeet		☐ Brokerage		
		<del>-</del>	Other		
Ci	ity State ZIP Code	<del>-</del>	Curier		
securi	u now have, or did you have within ities, cash, or other valuables?	year before you filed for bankrup	tcy, any safe deposit l	oox or other depository	for
ZÍ No					
Ye	s. Fill in the details.				
		Who else had access to it?	Describe the	contents	Do you stil
					have it?
					☐ No
Na	ame of Financial Institution	- Name			☐ No ☐ Yes
			TO THE STATE OF TH		
	ame of Financial Institution umber Street	Name Number Street			

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Debtor 1	Chaquita Harris First Name Middle Name	Last Name	Case number (if known)	
22. Hav	e you stored property in a storage un No	nit or place other than your home w	ithin 1 year before you filed for bankruptcy?	
	Yes. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you still have it?
	Name of Storage Facility	Name		□ No □ Yes
	Number Street	Number Street		
	***************************************	City State ZIP Code	TO THE STATE OF TH	
	City State ZIP Code	_		
Part 9	Identify Property You Hold	i or Control for Someone Else		
23. Do			property you borrowed from, are storing for,	
V	No			
	Yes. Fill in the details.			
		Where is the property?	Describe the property	Value
	Owner's Name	-		\$
	Number Street	Number Street		¥
		-		
	City State ZIP Code	- City State Zi	PCode	
Part 1		mental Information		
For the	purpose of Part 10, the following def			
<b>■</b> Env	ironmental law means any federal, st	ate, or local statute or regulation of	oncerning pollution, contamination, releases of	
IFCLA	ardous or toxic substances, wastes, ouding statutes or regulations controll	or material into the air, land, soil, s	Urface water groundwater or other medium	
		erty as defined under any environm	ental law, whether you now own, operate, or	
a Haza	ardous material means anything an e	nvironmental law defines as a baza	rdous waste, hazardous substance, toxic	
500	stance, nazardous material, pollutant	, contaminant, or similar term.		
Report	all notices, releases, and proceeding	s that you know about, regardless	of when they occurred.	
24. Has	any governmental unit notified you th	at you may be liable or potentially	liable under or in violation of an environmental	law?
Ø,				
U Y	es. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
N	iame of site	Governmental unit		***************************************
រ	lumber Street			
••		Number Street		
-		City State ZIP Code		
c	ity State ZIP Code			

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btor 1	Chaquita Harris		Cana number	
	First Name Middle Name	Last Name	Case number (if known)	
Hav	e you notified any governmental	unit of any release of hazardous mat	erial?	
<b>Z</b>	No			
	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
			•	
	Name of site		·	
	Hame Of Sife	Governmental unit		
	Number Street	Number Street		
		City State ZIP Code	_	
	City State ZIP C			
	City State ZIP Co	ode		
lave	you been a party in any judicial	Or administrative proceeding under	any environmental law? Include settlements	
<b>Z</b>	ام ام	er sammondare proceeding under a	my environmental law? include settlements	and orders.
	es. Fill in the details.			
	To the me the details.			<b>*</b> *
		Court or agency	Nature of the case	Status of the case
c	ase title			
		Court Name	<del></del>	Pending
-				On appea
		Number Street	<del></del>	☐ Conclude
ō	ase number			
_		City State ZIP C	ode	
rt 11		Business or Connections to An		
Vithi	in 4 years before you filed for bar	nkruptcy, did you own a business or	have any of the following connections to an	y business?
•	<ul> <li>A sole proprietor or self-emplo</li> </ul>	yed in a trade, profession, or other a	Ctivity, either full-time or nart-time	
_	A member of a limited liability	company (LLC) or limited liability par	tnership (LLP)	
	A partner in a partnership			
_	An officer, director, or managin			
_	An owner of at least 5% of the	voting or equity securities of a corpo	ration	
	o. None of the above applies. Go			
<b>Z</b> Y	es. Check all that apply above an	d fill in the details below for each but	siness.	
l	Harris Healthcare	Describe the nature of the busine	ss Employer Identification nu	mber
_	Business Name	<del></del>	Do not include Social Secu	rity number or ITIN.
		Care provider	EIN: 4 6-4 5	7 7 6 3 6
Ī	Number Street	********	EIR	<u> </u>
		Name of accountant or bookkeep	er Dates business existed	
-		NA		
7	ity State ZIP Cod		From 02/05/2015 To 01	<u>/18/2</u> 018
•	City State ZIP Cod			
_		Describe the nature of the busines	- inprojet identification flut	
E	Business Name		Do not include Social Secu	rity number or ITIN.
<u>.</u>			EIN:	
N	umber Street	Name of accountant or bookkeepe		
_		warne of accountant of bookkeeps	Dates business existed	
_				
_	Sh.		From To	·····
C	ity State ZIP Code	9		

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r 1	Chaquita Harris	S	Cacanu	mber (if known)
	First Name Middl	le Name Last	Name	(I of October)
			Describe the nature of the business	Employer Identification number
<u></u>		<del> </del>		Do not include Social Security number or ITIN.
B	usiness Name			: EIN:
Ni.	umber Street			· LIN,
	Singer Bucci		Name of accountant or bookkeeper	Dates business existed
				From To
Ci	ity	State ZiP Code		Commence and Address of the Commence and Com
ithin stitut No	tions, creditors, or	ı filed for bankrup other parties.	etcy, did you give a financial statement to anyon	ne about your business? Include all financial
	s. Fill in the details	below.		
			Date issued	
Na	tme		MM / DD / YYYY	
			MM/DU/TTT	
Nu	ımber Street			
City	ty s	State ZIP Code		
12:	Sign Below			
121/0	road the answers	on this Statement		
iswe	ers are true and col	rrect. I understand	of Financial Affairs and any attachments, and it that making a false statement, concealing pro	declare under penalty of perjury that the
				perty, or obtaining money or property by fraud
COII	mection with a ban	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
COII	nection with a ban S.C. §§ 152, 1341, 19	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
COII	mection with a ban	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
COII	mection with a ban	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
U.S	mection with a ban	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
S U.S	6.C. §§ 152, 1341, 1	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
Sign	6.C. §§ 152, 1341, 1	ikruptcy case can	result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud for up to 20 years, or both.
Sign	nature of Debtor 1	Rruptcy case can 519, and 3571.	result in fines up to \$250,000, or imprisonment  ( Signature of Debtor 2	for up to 20 years, or both.
Sign	nature of Debtor 1  eu attach additional	Rruptcy case can 519, and 3571.	Signature of Debtor 2	for up to 20 years, or both.
Sign Date	nature of Debtor 1  eu attach additional	Rruptcy case can 519, and 3571.	result in fines up to \$250,000, or imprisonment  ( Signature of Debtor 2	for up to 20 years, or both.
Sign	nature of Debtor 1  eu attach additional	Rruptcy case can 519, and 3571.	result in fines up to \$250,000, or imprisonment  ( Signature of Debtor 2	for up to 20 years, or both.
Sign Sign Date of you	nature of Debtor 1  e u attach additional	pages to Your St	Signature of Debtor 2  Date  attement of Financial Affairs for Individuals Filin	for up to 20 years, or both.
Date	nature of Debtor 1  e u attach additional	pages to Your St	result in fines up to \$250,000, or imprisonment  ( Signature of Debtor 2	for up to 20 years, or both.
Sign Date  Office of the second of the secon	nature of Debtor 1  eu attach additional  oss	pages to Your States	Signature of Debtor 2  Date  attement of Financial Affairs for Individuals Filing is not an attorney to help you fill out bankrupto	for up to 20 years, or both.
Sign Date Office you No No No	nature of Debtor 1  eu attach additional  oss	pages to Your States	Signature of Debtor 2  Date atement of Financial Affairs for Individuals Filing is not an attorney to help you fill out bankrupto	for up to 20 years, or both.